

**IHS/CAO TRIBAL ADVISORY COMMITTEE MEETING**  
**October 7, 2003**  
**EXECUTIVE SUMMARY**

<b>Members in attendance:</b>	<b>Tribe Represented</b>	<b>Region Represented</b>
Mr. Peter Masten, Jr.	Hoopa Valley Tribe	Northern
Mr. Richard Wilder	Fort Independence Reserv.	East Central
Ms. Donna Schuler	Sherwood Valley Rancheria	West Central
Ms. Kelly Short-Slagley	Agua Caliente Band of MI	Southern
Mr. James Hill	La Posta Reservation	Southern
Mr. Joseph C. Saulque	National Indian Health Board	
Mr. Dave Rambeau	Urban Programs	

IHS staff in attendance:

Ms. Margo Kerrigan,	Area Director
Mr. J. Paul Redeagle,	Deputy Area Director
Mr. Dennis Heffington,	ISDA Program Manager
Mr. Kerry Gragg,	Chief, Health Facilities Engineering

The California Area Tribal Advisory Committee (CATAC) meeting began on Tuesday, October 7<sup>th</sup> 9:00 a.m. and ended at 3:30 p.m. In addition to the attendees listed above, this meeting was open to and attended by additional tribal and program leaders, Indian Health Service (IHS) staff, and guests.

Ms. Kerrigan Director, California Area Indian Health Service (CAIHS), opened the meeting with a welcome, and introductions.

**ORIENTATION FOR MEMBERS** - Mr. Dennis Heffington provided an orientation for new and continuing members. The orientation included a review of the history of the CATAC, the preamble developed in 1997, meeting ground rules, the roles and responsibilities of the CATAC member including the Tribal Advisory Committee Circular No. 02-03, and the Tribal Consultation Circular No. 02-02. As discussed during the previous meeting an extensive list of acronyms was also discussed.

Since the CATAC member attendance was low at this meeting, Mr. Heffington will notify all members, health program directors, and all tribes of future meetings. E-mail, faxed notices, and telephone calls will be made to each member.

**ANNUAL TRIBAL LEADER'S MEETING** - Ms. Kerrigan reviewed comments and recommendations provided during the last Annual Tribal Leader's Meeting held at John Ascuaga's Nugget in Sparks, Nevada. After discussion, additional recommendations for the 2004 Annual Tribal Leader's Meeting made by CATAC members included breakout sessions in the afternoon, and the meeting length be 2 ½ days. Additional details would be discussed at the next CATAC meeting planned in January.

**FACILITIES APPROPRIATION ADVISORY BOARD** - Ms. Donna Schular, a CATAC member representing the West Central Region, and the Sherwood Valley Rancheria, serves as the California representative to the FAAB. Ms. Schular provided a summary of the FAAB orientation meeting she attended with Mr. Fluette.

**REAUTHORIZATION OF THE INDIAN HEALTH CARE IMPROVEMENT ACT** - Ms. Rachel Joseph, Budget Formulation Team Representative and Co-Chairperson, as well as Co-Chairperson to the National Steering Committee on the Reauthorization of the Indian Health Care Improvement Act (IHCIA) provided a report via telephone conference on issues related to passage of the act and the effort from all to "move the bill". "Contact your congressional representatives to support and co-sponsor this bill".

**CARDIOVASCULAR DISEASE AND PREVENTION** - Mr. Jeffrey C. Knight, a tribal representative from the West Central Region, and from the Middletown Rancheria, along with Riverside/San Bernardino County Indian Health representatives, attended the round table discussion to identify the major elements, contributing factors, a five-year action plan, for the prevention of Cardiovascular Disease (CVD) among American Indians and Alaska Natives. Ms. Anna Wells, from the Riverside-San Bernardino program reported on the roundtable discussion held on September 25<sup>th</sup> and 26<sup>th</sup>, 2003 in the Washington, D.C. area.

**CALIFORNIA AREA EPIDEMIOLOGY (EPI) CENTER** - Mr. Michel Lincoln, IHS Deputy Director, made comments concerning the need for an "epi" center in the California Area and the need for California to be competitive. The 2004 budget did not contain epi funding specifically, but there's still hope. In the 2005 budget process, the agency has requested resources and language for epi centers. A competitive process is anticipated with Headquarter assistance for the California Area to identify needs and develop a strong proposal.

This year some resources have been provided to maintain the California Rural Indian Health Board, Inc.'s epi process and data efforts. All data will be used on behalf of California.

Epidemiological data is very important in many areas, from counties to Congress, to benefit Indian people.

**YRTC PROJECT JUSTIFICATION DOCUMENT (PJD) PRESENTATION** - Kerry Gragg, Area Facilities Engineer, provided an update of the status of the Project Justification Document (PJD) for the proposed Youth Regional Treatment Center (YRTC) Network expansion for California. The PJD outlined the details of the two substance abuse facilities currently proposed. Following programmatic approval at IHS Headquarters, the proposed costs for the project will be formally included in the budget request. "Site selection" decisions will be based on many factors including availability of staff and land. The proposed funding for the first facility will be expected in FY 2005 and the second facility in FY 2006.

Because the "proposed service program" is one component of the larger overall treatment network, the site must have access to medical services, must have reasonable proximity to air travel and car rental locations, and meet various other site criteria.

This presentation to the CATAC was for informational purposes. The same presentation is planned for four regional consultation sessions planned in October to discuss with California tribal governments site selection criteria for potential YRTC construction. These consultation meetings have been announced and were posted on the CAO web site.

A recap of the presentation was as follows:

The planned construction of two Youth Regional Treatment Centers (YRTCs), which are medically-monitored, dual-diagnosis inpatient treatment facilities for substance abusing adolescents, will include one in northern region of California, and one in the central/southern region of California. The YRTCs, if fully funded by Congress, could be completed as early as FY 2007 or FY 2008.

The cost of each proposed facility is estimated at \$10.5 million including the cost of land acquisition; with a proposed \$2.2 million for planning and design to begin with the proposed FY 2005 Indian Health Service (IHS) budget. Each facility will be gender-specific with 32 (there was some question as to this was to be 30 or 32 beds) beds, a six-bed close observation unit, and five family suites. The first region to identify a suitable location will determine which YRTC will be built first.

If trust/Indian land on which to build the YRTC's cannot be identified, then purchasing land commercially at an estimated cost of \$1.5 million for a 10-15 acre parcel of land outside of the greater San Francisco Bay and Los Angeles metropolitan areas will be considered. The cost of the commercial land would come out the planned \$10.5 million, leaving the balance to go towards construction.

Any suitable 10-15 acre parcel of trust/Indian land would be evaluated based on the following site criteria:

- Topography: less than 15% slope
- Water table: not in wetland or flood plain
- Soil conditions: suitable for foundation and not seismically active
- Historical significance: no historical or archeological sites
- Environmental hazards: no hazardous materials or previous contamination
- Utilities: community water, sewer, and power available
- Zoning: zoned for intended purpose
- Noise: not in or adjacent to a commercial or industrial area
- Fire protection: full-time fire department available

The YRTC Network Task Force asked that the following additional site criteria in evaluating all potential sites also be considered.

- Location: near suburban/metropolitan area
- Transportation: An airport with scheduled airline service within 50 miles
- Prevent runaways: not next to freeway or railroad
- Emergency hospital services/acute psychiatric care: within 10 miles

These criteria will serve as a preliminary guideline in assessing the suitability of a potential trust land site.

Once possible locations are identified, the IHS (Headquarters) Office of Environmental Health and Engineering, Division of Engineering Services - Dallas will be asked to conduct a formal

Site Selection and Evaluation Report (SSER) and rank the options. The California Area Tribal Advisory Committee will be involved in the SSER decision for both the north region and the south/central region.

**NEXT CALIFORNIA AREA TRIBAL ADVISORY COMMITTEE MEETING** - The next CATAC meeting is planned for January 21-22, 2004 and will be held at the Sacramento Radisson Hotel.